

# REGISTRATION: CANDIDATES/CANDIDATE COMMITTEE

Candidate's Name (Do not abbreviate. Include candidate's full name)

*William Glen Kuehne*

Candidate's Committee Name (Do not abbreviate.)

*None*

Mailing Address

*HCI-Box 6*

City

*Keller*

County

*Ferry*

Zip + 4

*99140*

1. What office are you running for?

Legislative District, County or City

Position No.

Do you now hold this office?

*PUD Commissioner*

*Ferry County*

*Position*

*District #3*

Yes \_\_\_\_\_ No \_\_\_\_\_

2. Political party (if partisan office)

*N/A*

3. Date of general or special election

*Nov. 12, 1996*

4. How much do you plan to spend during your entire election campaign, including the primary and general elections? Based on that estimate, choose one of the reporting options below.

If no box is checked you are obligated to use Option III, Full Reporting. See instruction manuals for information about reports required and changing reporting options.

☒ **Option I MINI REPORTING**

In addition to my filing fee of \$ *42*, I will raise and spend no more than \$500, including charges for the voters pamphlet. I will accept no more than \$200 in the aggregate from any contributor except myself.

☐ **Option II ABBREVIATED REPORTING**

I will raise and spend no more than \$2,000, including my filing fee and charges for the voters pamphlet. I will accept no more than \$200 in the aggregate from any contributor except myself.

☐ **Option III FULL REPORTING**

I will use the Full Reporting System. I understand frequent, detailed reports are required.

5. Campaign Telephone Number: ( )

Campaign Fax Number: ( )

6. Treasurer's Name and Address (Candidate may be treasurer.) (List deputy treasurers on attached sheet.)

Daytime Telephone Number

*509) 634-8433*

7. Committee's Principal Officers. List name, address and title.

*N/A*

8. Campaign Bank or Depository

Branch

City

*N/A*

*N/A*

*N/A*

9. Related or Affiliated Political Committees. List name, address and relationship.

*N/A*

10. Campaign records are to be open for public inspection the last eight days before election. (Two hours daily between 8 AM - 8 PM, Monday - Friday.) Show location and hours below:

Street Address (Do not use a Post Office Box Number)

Hours

*N/A*

**11. CERTIFICATION:**

I certify that this report is true, complete and correct to the best of my knowledge.

Candidate's Signature

Date

*William G. Kuehne*

*7/25/96*

Please advise us about which forms and instructions you need. Remember, candidates must file a Financial Affairs Statement (F-1) unless a current one is already on file with PDC. Check all boxes which apply.

- ☒ I already have financial affairs and campaign disclosure forms and instructions.
- ☐ I am using Mini Reporting and, therefore, do not need the other campaign disclosure forms. In addition, I have already filed my Financial Affairs Statement and need no additional F-1 forms.
- ☐ I will obtain all forms and instructions from my county elections office.
- ☐ I want PDC to mail me: ☐ the F-1 instruction booklet (which includes forms) ☐ the appropriate campaign disclosure forms and instructions.

**DISTRIBUTION OF THIS REPORT:**

ORIGINAL — Public Disclosure Commission

COPY — County Elections Dept. (Auditor)

COPY — Your own records

(Note: City candidates contact City Clerk to see if local filing is required.)